

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Senior Management Team

Minutes of the meeting held on 30 May 2017

Present

Andrew Dillon	Chief Executive
Mark Baker	Director – Centre for Guidelines
Ben Bennett	Director – Business Planning and Resources
Jane Gizbert	Director – Communications
Gill Leng	Director – Health and Social Care
Alexia Tonnel	Director – Evidence Resources

In attendance

David Coombs	Associate Director – Corporate Office (minutes)
Chris Carson	Programme Director – Centre for Guidelines (item 6.3)
Mirella Marlow	Programme Director and Deputy Centre Director – Centre for Health Technology Evaluation
Jane Silvester	Associate Director – Social Care and Leadership – Health and Social Care (item 6.1)
Rebecca Smith	Head of Media – Communications (item 6.2)
Jonathan Underhill	Medicines Clinical Adviser – Health and Social Care (item 6.3)
Catherine Wilkinson	Associate Director – Finance and Facilities (item 6.3)

Apologies (item 1)

1. Apologies were received from Carole Longson who was represented by Mirella Marlow.

Freedom of Information and publication scheme (item 2)

2. The final minutes will be made available on the NICE website subject to the redaction of any exempt material.

Notes of the previous meeting (item 3)

3. The minutes of the meeting held on 15 May 2017 were approved as a correct record.

Matters arising (item 4)

4. It was noted that the actions from the meeting held on 15 May 2017 were complete or in hand.
5. Andrew Dillon briefed SMT on the discussion with the Department of Health (DH) on the capacity challenges in the technology appraisal (TA) programme arising from the forecast increase in referrals to the programme. He confirmed Carole Longson will bring a paper to SMT on proposals for allocating additional internal resources to the TA programme in 2017-18. Gill Leng highlighted the importance of understanding the ongoing trajectory for the number of referrals to the TA programme before entering into longer term funding commitments.

Board meetings (item 5)

6. SMT noted the actions from the Board meeting on 17 May 2017.

7. The agenda items for the Board meetings in June and July were agreed.

Social care quick guides and dissemination support 2018-20 (item 6.1)

8. Gill Leng presented the options for the development of quick guides and dissemination support for NICE's social care guidance after the end of the NICE Collaborating Centre for Social Care (NCCSC) contract in March 2018. Following questions from SMT, Jane Sylvester confirmed that suitable NICE guidance for the quick guides had been identified. In addition to social care guidance, this includes guidance in areas such as public health, which is particularly relevant to social care audiences.
9. SMT discussed and supported the proposed work, noting the continuity of this with that currently undertaken by the NCCSC under the existing contract with NICE. It was noted that whilst alternative suppliers may potentially express initial interest in tendering for the quick guides and dissemination support, the specialist expertise and knowledge required, the potential TUPE obligations, and the required delivery timeframe, may significantly limit the level of actual bids received. SMT therefore agreed the scope for waiving tender requirements should be explored, given the operational benefits this could deliver.

ACTION: BB

10. If a tender waiver is not feasible or appropriate, then SMT agreed to externally tender for the quick guides and dissemination activity.

ACTION: GL / JS

11. Jane Gizbert highlighted the importance of ensuring NICE's Communications Directorate are involved in quality assuring the quick guides.

ACTION: JS

Social media guidance for NICE staff (item 6.2)

12. Rebecca Smith presented the proposed guidance for NICE staff on the use of social media. This has been developed in response to requests from staff for advice on using their own social media accounts, and those set up by NICE teams.
13. SMT discussed the guidance and agreed it should be divided into two sections. Firstly, to provide guidance on the arrangements for establishing and operating team social media accounts, when there is a business need to supplement NICE's corporate accounts. Secondly, to outline staff responsibilities when using their personal social media accounts. This should highlight that even when staff are using their own private accounts, they could still be seen as representing NICE, and may be subject to the obligations under NICE's standards of business conduct. It was agreed that further context should be included to explain the rationale for the guidance, and highlight the social media accounts overseen by NICE's communications directorate. The revised guidance should be brought to SMT for review and approval.

ACTION: RS / JG

14. Andrew Dillon asked for information on the social media accounts currently operated by individual NICE teams.

ACTION: RS

British National Formulary (item 6.3)

15. Mark Baker introduced the paper that outlined a proposed reduction in the size of the print run for the next edition of the British National Formulary (BNF) in response to the 37% increase in print costs in 2016-17. A decision on the number of printed copies is required in June 2017 to enable distribution of the 2017-18 edition in October 2017.
16. Chris Carson outlined the proposals for reducing the number of printed copies by 53% in England. The paper summarised the rationale for the reduction, which took account of feedback from clinical staff across NICE.
17. SMT discussed and queried the cost increase, noting this appeared to exceed exchange rate fluctuations. SMT noted the specialist nature of the paper used, but considered whether there could be scope to reduce the unit cost of the printed copies. It was agreed that the BNF publisher should confirm in writing the cause of the significant cost increase, and whether any actions could be taken to reduce the unit costs in 2017-18.

ACTION: CW / CC

18. SMT extensively discussed the paper and agreed there is a compelling argument to reduce the number of printed copies given the substantial increase in printing costs at a time NICE's funding is reducing. SMT noted there is anecdotal evidence of oversupply of the hard copies, due in part to inefficiencies in the distribution of the hard copies in the receiving organisations, lack of certainty about the number of copies required, and use of the digital versions. SMT noted the rationale for the current level of provision to a number of organisations, such as the Department of Health (DH) and higher education institutions is unclear, particularly given programme rather than administration grant in aid funding is provided for the BNF. SMT noted however, the importance of the BNF print format for some healthcare professionals and agreed that any changes in the distribution of the hard copies should be carefully managed, and views of key stakeholders sought.
19. SMT agreed therefore to adopt a two stage approach. In 2017-18 the number of hard copies to NHS trusts, GPs, community pharmacists, and dentists should be reduced by 10%, with more significant reductions for the other groups such as the DH and higher education institutions. In the longer term SMT supported a shift to providing hard copies to clinical care settings rather than individual clinicians, which would enable a further reduction in the print-run for 2018-19. It was agreed this shift to a setting-based distribution should be discussed with key national stakeholders including the Department of Health, the National Quality Board, and the Royal Colleges.

ACTION: GL / MB / CC

20. SMT agreed in principle to utilise non-recurrent resources to fund the remainder of the financial pressure in 2017-18 arising from the cost increases, after the application of this initial reduction in the print-run and any reductions in the proposed unit cost that may follow NICE's correspondence with the BNF publisher. Chris Carson was asked to brief SMT on the revised proposals for the 2017-18 print-run and Ben Bennett was asked to confirm the scope for covering the outstanding cost pressure from non-recurrent funding in 2017-18.

ACTION: CC / BB

2018-19 Harkness Fellowships in Health Policy and Practice (item 6.4)

21. Andrew Dillon asked SMT members to consider the invitation to nominate a candidate for the 2018-19 Harkness Fellowships in Health Care Policy and Practice, and discuss any potentially suitable NICE staff with him.

ACTION: SMT

SMT retreat: May 2017 (item 6.5)

22. SMT noted the outcome of the discussions at the SMT retreat on 22 and 23 May 2017, and that the arising actions are in progress.

Strategy (item 7)

23. None.

Weekly staff SMT updates (item 8)

24. SMT agreed the staff updates.

ACTION: DC

Any other business (item 9)

25. None.